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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL Anna Eshoo for Congress]	
ADDRESS (number and street) 555 Capitol Mall, Suite 1425			_	
CITY, STATE, and ZIP CODE	CA 958	4.4		
Sacramento 2. NAME OF CANDIDATE			4 FEC IDENTIFICATIO	N NUMBER
Anna Eshoo	3. OFFICE SOUGHT (State and District) House CA 18		4. FEC IDENTIFICATION NUMBER C00258475	
5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE	NOTICE FILED ON	/	<i>!</i>
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
American Hospital Association PAC			day, year)	
325 Seventh Street, NW, #700			10/16/2014	2500.00
	Transaction ID : INC.F65.18092			
Washington DC 20004	Occupation			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month,	Amount
C. Duane Dauner	CA Assn. Hospital & Health Systems		day, year)	
2820 Calle Vista Way			10/16/2014	2000.00
2020 Gaille Visita Way	Transaction ID : INC.F65.18091			
Sacramento CA 95821	Occupation President/CEO			
			Data (as a set	Amount
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer		Date (month, day, year)	Amount
	Occupation			
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation		Date (month,	Amount
			day, year)	
			-	
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer Occupation		Date (month, day, year)	Amount
SIGNATURE (optional) Christopher Ream	[Electronically Filed]		For further information contact: Federal Election Commission 999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100	

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